FORM D 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: Estimated average burden hours per response . . . 16.00

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DATE RE	CEIVED				
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Name of COCarina (dicate change)
Name of Offering (L. check if this is an amendment and name has changed, and incommon Stock	dicate change.)
	<u></u> .
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	06 Section 4(6) ULOE
Type of Filing: New Filing	
A. BASIC IDENTIFICATION DA	ATA HOND OF THE PART OF THE PA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and in	((Main anna suur asini asina asinea iniii anana mar user
United Independent Inc.	06049342
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
8502 E. Chapman Avenue, #384, Orange, CA 92869 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	(866) 372-7140 Telephone Number (Including Area Code)
Brief Description of Business In-Home Décor Installation Logistics Services	PROCESSED
Type of Business Organization Corporation limited partnership, already formed	□ other (please specify): OCT 2 5 2006
☐ business trust ☐ limited partnership, to be formed	${\cal L}$ thomson financial
Month Year	
Actual or Estimated Date of Incorporation or Organization:	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbrevia CN for Canada; FN for other foreign jurisdicti	
GENERAL INSTRUCTIONS	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sea, or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part É and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number

SEC 1972 (6/02)

A. BASIC IDENTIFICATION DATA

A. DASIC (DENTIFICATION DATA								
2. Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;								
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equi securities of the issuer: 	ty							
Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers:	; and							
Each general and managing partner of partnership issuers.								
· · · · · · · · · · · · · · · · · · ·	ral and/or aging Partner							
Full Name (Last name first, if individual) The Newell Corporation, a Nevada corporation	<u> </u>							
Business or Residence Address (Number and Street, City, State, Zip Code) 8502 E. Chapman Avenue, #384, Orange, CA 92869								
	eral and/or aging Partner							
Full Name (Last name first, if individual) Todd Banhidy								
Business or Residence Address (Number and Street, City, State, Zip Code) 8502 E. Chapman Avenue, #384, Orange, CA 92869								
	eral and/or aging Partner							
Full Name (Last name first, if individual) Robert Fry								
Business or Residence Address (Number and Street, City, State, Zip Code) 8502 E. Chapman Avenue, #384, Orange, CA 92869								
	eral and/or aging Partner							
Full Name (Last name first, if individual) Charles Williams								
Business or Residence Address (Number and Street, City, State, Zip Code) 8502 E. Chapman Avenue, #384, Orange, CA 92869								
` '	eral and/or aging Partner							
Full Name (Last name first, if individual) Laura Ferrell								
Business or Residence Address (Number and Street, City, State, Zip Code) 8502 E. Chapman Avenue, #384, Orange, CA 92869								
	eral and/or aging Partner							
Full Name (Last name first, if individual)								
Business or Pasidance Address (Number and Street City, State Zin Code)								

Check Box(e	s) that App	oly: 🔲	Promoter		Beneficial	Owner	☐ Execu	itive Office	r 🗆	Director		eneral and/or anaging Partner
Full Name (Last name first, if individual)												
Don't a constant		4 JJ	Olymph	on and Star	est City St	toto Zin C	oda)					
Business or F	Cesidence A	Address	(Numb	er and Sire	et, City, St	aic, Zip C	oue					
			(Use blank	k sheet, or	copy and u	se addition	nal copies o	f this sheet	, as necess	ary.)		
				В. 1	NFORM <i>A</i>	TION A	BOUT OF	FERING				
												Yes No
1. Has the	issuer solo								offering?			[[X]
				• •			iling under				_	
2. What is	the minim	um invest	ment that	will be ac	cepted fro	m any in	dividual? .		• • • • • • • • • • • • • • • • • • • •		\$	1,500,000
												Yes No
3. Does the	offering	permit joi	nt owners	hip of a si	ngle unit?							
4. Enter the	informatio	n requeste	d for each p	erson who	has been o	or will be j	paid or give	n, directly	or indirect	ly, any con	ımis-	
sion or si	milar remu ed is an ass	incration for	or solicitations	on of purch	iasers in co cer or deale	nnection v	with sales o	f securities SEC and/or	in the offe with a sta	ring. If a po te or states.	erson	
list the na	ame of the	broker or c	lealer. If m	ore than fi	ve (5) perse	ons to be l	isted are as:					
or dealer.	, you may s	set forth the	e information	on for that	broker or d	lealer only						
Full Name (I	ast name f	îrst, if indi	vidual)									
Business or I	Residence /	Address ((Number ar	id Street, C	City, State, 2	Zip Code)						
Name of Ass	sociated Bro	oker or De	aler									
States in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit P	urchasers						
(Check ".	Ali States"	or check is	ndividual S	tates)								☐ All States
[AL]	[AK]	[AZ]	AR	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
{IL}	[IN]	[[[]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]			[NY]	[NC]	[ND]	[OH]	[OK]	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	[ՄՐ]	[V I]	[VA]	[WA]	[W V]	[WI]	[W I]	[[]
Full Name (Last name	iirsi, ii ind	ividuai)									
Business or	Residence	Address	(Number a	nd Street, (City, State,	Zip Code)					
Name of As	sociated Br	roker or De	ealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers												
(Check '	'All States'	or check	individual S	States)								☐ All States
[AL]	[AK]	[AZ]	[AR]		[CO]			[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	KS			[ME]	[MD]	[MA]		[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] { SD }	[NH] [TN]	[TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Name (LIAJ	(01)	. * *]	[111]	(, 1	1""1	1 "'1		(- ~)
Business or	Residence	Address	(Number a	nd Street,	City, State,	Zip Code)					

Name of Associated Broker or Dealer

(Check "All States" or check individual States)				☐ All States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [F.		GA	[HI]	[ID]
	11]	[MN]	[MS]	[MO]
	Н]	[OK]	[OR]	[PA]
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [W	/V]	[WI]	[WY]	{ PR]
(Use blank sheet, or copy and use additional copies of this sheet, as a	necess	sary.)		
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE	OF PRO	CEEDS	
. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Aggren Offering		Amount Already Sold(1)
Debt	¢	0	11100	s 0
		2,000,	000	£ 2,000,000
Equity	\$	2,000,		\$2,000,000
Convertible Securities (including warrants)	\$	0		\$0
Partnership Interests		0		c 0
Other (Specify)		0		s 0
		2,000,	000	2,000,000
Total	\$			\$
Answer also in Appendix, Column 3, if filing under ULOE.				
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			imber estors	Aggregate Dollar Amount of Purchases
Accredited Investors		1		\$2,000,000
Non-accredited Investors		0		\$0
Total (for filings under Rule 504 only)			<u> </u>	\$0
Answer also in Appendix, Column 4, if filing under ULOE.				
 If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Ouestion 1. 		79.	6	Dellas America
Type of offering			pe of curity	Dollar Amoun Sold
Rule 505		N/A	4	\$N/A
Regulation A		0		\$0
		0		\$0
Rule 504	••			

- 4 .	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
•	Transfer Agent's Fees				\$	0
	Printing and Engraving Costs			X	\$	0
	Legal Fees			X	\$	2,000
	Accounting Fees			X	\$	0
	Engineering Fees				\$	0
	Sales Commissions (specify finders' fees separately)				\$	0
	Other Expenses (identify)		•••••		\$	0
	Total	••••		x	\$	2,000
5.	b. Enter the difference between the aggregate offering price given in response to Part C - Question I and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.		Paym Off Direc	ents to icers, tors, & liates	-	1,998,000 Payments To Others
	Salaries and fees		\$	[_ \$_	
	Purchase of real estate		\$		\$_	
	Purchase, rental or leasing and installation of machinery and equipment	x	\$ 124,0	000	\$ _	
	Construction or leasing of plant buildings and facilities		\$		\$_	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$			
	Repayment of indebtedness	х	\$ 650,0	000_	\$_	
	Working capital		\$	[x \$_	1,224,000
	Other (specify):		\$	[□ \$_	
			\$	[\$_	1.001.000
	Column Totals	×	\$_774,0		x \$_	1,224,000
	Total Payments Listed (column totals added)		[X]	\$ <u>1</u> ,	,998,00	<u>u </u>

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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type) United Independent Inc.	Signature Lucie	Datc September 27, 2006	
Name of Signer (Print or Type) Laura Ferrell	Title of Signer (Print or Type) Secreary		

ALLENION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)